

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/532,156-Conf. #6179
	Filing Date	November 7, 2005
	First Named Inventor	Jerome L. Ackerman
	Art Unit	2813
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	022727-0129

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 26710

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

26710

OR

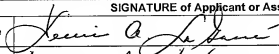
<input type="checkbox"/> Firm or Individual Name	Quarles & Brady LLP		
Address	411 East Wisconsin Avenue		
City	Milwaukee		
Country	State	Wisconsin	Zip 53202
Telephone	414-277-5405	Email	jcook@quarles.com

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Denise A. La Gasse		
Date	1/27/08	Telephone	617 954 9352

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.

Revocation of Power of Attorney or Authorization of Agent

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.5(a)(4).

Dated: _____ Signature: _____ (William C. Geary III)